

CITY OF CONCORD
ZONING BOARD OF ADJUSTMENT

FOR OFFICE USE ONLY

APPLICATION FOR APPEAL

Case Number: _____	_____ Administrators Decision
Date Received: _____	_____ Special Exception
Received by: _____	_____ Variance
Amount Paid: _____	_____ Equitable Waiver

NAME OF APPLICANT _____ PHONE NO. _____

ADDRESS _____

OWNER OF PROPERTY _____

LOCATION & DESCRIPTION OF PROPERTY _____

LOT NO. _____ PAGE NO. _____ ZONING DISTRICT _____

OVERLAY DISTRICTS _____ LSD _____

PROPOSED USE _____

DETAILS OF REQUEST _____

FOR OFFICE USE ONLY _____

PROPOSED DEVELOPMENT:	Use..... _____	Conforming	_____	Non-Conforming
	Lot Coverage.....	_____	Conforming	_____ Non-Conforming
	Setbacks.....	_____	Conforming	_____ Non-Conforming
	Height.....	_____	Conforming	_____ Non-Conforming
	Parking/Loading..	_____	Conforming	_____ Non-Conforming
	Other.....	_____	Conforming	_____ Non-Conforming

APPLICATION FOR APPEAL:
CODE ADMINISTRATOR’S DECISION/INTERPRETATION

The undersigned alleges that an error has been made in the interpretation and/or administration of the provisions of the Zoning Ordinance as follows: Article _____, Decision dated _____ rendered to _____(appellant).

EXPLANATION OF ADMINISTRATOR’S DECISIONOR INTERPRETATION:

APPELLANT’S REQUESTED DECISION OR INTERPRETATION:

Signature: _____

Printed: _____

Date: _____